2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 17, 2012
Secretary of State

DOCUMENT# L05000051274

Entity Name: ALG INSURANCE LLC

Current Principal Place of Business:

2670 N. UNIVERSITY DR. SUITE 201
SUNRISE, FL 33322 US

New Principal Place of Business:

1451 W CYPRESS CREEK RD
300
FORT LAUDERDALE, FL 33309 US

Current Mailing Address:

2670 N. UNIVERSITY DR. SUITE 201
SUNRISE, FL 33322 US

New Mailing Address:

1451 W CYPRESS CREEK RD
300
FORT LAUDERDALE, FL 33309 US

FEI Number: 20-2888191 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ABELSON, SCOTT A
2670 N. UNIVERSITY DR. SUITE 201
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

ABELSON, SCOTT A
1451 W CYPRESS CREEK RD
300
FORT LAUDERDALE, FL 33309 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: SCOTT A ABELSON 04/17/2012
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: ABELSON, SCOTT A
Address: 1451 W CYPRESS CREEK RD STE 300
City-St-Zip: FORT LAUDERDALE, FL 33309 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: SCOTT A ABELSON MGRM 04/17/2012
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date